

**§ 131E-294. Additional consumer protection and quality standards.**

Unless otherwise preempted by federal law or mandated by the Medicare program, the Division shall apply to provider sponsored organizations the same standards and requirements that the Department of Insurance applies to health maintenance organizations under Chapter 58 of the General Statutes with respect to the following consumer protection and quality matters:

- (1) Quality management programs (11 NCAC 20.0500, et seq.);
- (2) Utilization review procedures (G.S. 58-67-61 and G.S. 58-67-62);
- (3) Unfair or deceptive trade practices (Article 63 of Chapter 58 of the General Statutes);
- (4) Antidiscrimination (G.S. 58-3-25(b) and (c), 58-3-120, 58-63-15(7), and 58-67-75);
- (5) Provider accessibility and availability (11 NCAC 20.0300, et seq.);
- (6) Network provider credentialing (11 NCAC 20.0400, et seq.); and
- (7) Data reporting requirements under G.S. 58-67-50(e). (1998-227, s. 1.)